PART B - FEE(S) TRANSMITTAL							
Complete and send this forth together with applicable fee				P.O. Box			
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 08791 7590 09/08/2005					Note: A certificate of Fec(s) Transmittal. Th papers. Each additions have its own certificat	mailing can only be used is certificate cannot be used al paper, such as an assignme of mailing or transmission.	for domestic mailings of the for any other accompanying ent or formal drawing, must
BLAKELY SOKOLOFF TAYLOR & ZAFMAN 12400 WILSHIRE BOULEVARD SEVENTH FLOOR LOS ANGELES, CA 90025-1030					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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		AA 00			Ku	unho c	(Signature)
01 FC:1501 02 FC:1504		00 OP 00 OP			,	12/8/65	(Date)
APPLICATION NO.	FILING DATE 30.	00 OP	FIRST NAME	D INVEN	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/814,675	03/30/2004	Eun-Jung Jang				51876P606	8303
TITLE OF INVENTION: SEMICONDUCTOR MEMORY DEVICE CAPABLE OF STABLY PERFORMING ENTRY AND EXIT OPERATIONS OF SELF REFRESH MODE AND THE SELF REFRESH METHOD THEREOF							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1400			\$300 \$1700		12/08/2005
EXAMINER		ART UNIT		С	LASS-SUBCLASS]	
NGUYEN, VAN THU T		2824			365-222000		
1. Change of correspondence CFR 1,363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 BLAKELY SOKOLOFF						
Change of correspond	or agents OR alternatively						
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
HYNIX SEMIC	ONDUCTOR INC.		Republi	ic of	Korea		
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	atent):	☐ Individual ☐ C	orporation or other private gr	roup entity Government
4a. The following fee(s) are	. Payment of	Payment of Fee(s):					
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5. Change in Entity Status	(from status indicated above	•	☐ h Applie	ant is n	o longer claiming SMA	I I ENTITY status See 27.6	SER 1 27(a)(2)

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